## ECONOMIC AND FISCAL IMPACT STATEMENT

(REGULATIONS AND ORDERS)

STD. 399 (REV. 12/2013)

## ECONOMIC IMPACT STATEMENT

DEPARTMENT NAME	CONTACT PERSON	EMAIL ADDRESS	TELEPHONE NUMBER
Department of Justice	Melan Noble	Melan. Noble@doj.ca.gov	916.210.7011
DESCRIPTIVE TITLE FROM NOTICE REGISTER OR FORM 400	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D =	NOTICE FILE NUMBER
Regulations Adopted Pursuant to Prop. 5	56 Healthcare, Research &	Prevention Tobacco Tax Act of 2016	Z
A. ESTIMATED PRIVATE SECTOR COST IMPA	CTS Include calculations and	assumptions in the rulemaking record.	
Check the appropriate box(es) below to indicate	te whether this regulation:		
a. Impacts business and/or employees		orting requirements	
b. Impacts small businesses	<u></u>	criptive instead of performance	
· · ·	g. Impacts indiv		
c. Impacts jobs or occupations	<b>—</b> "		
d. Impacts California competitiveness		above (Explain below):	tata funda ta lacal
		ed regulations govern distribution of s d do not regulate the private sector.	tate futius to local
If any hay in Items 1	****	nplete this Economic Impact Statement.	
		scal Impact Statement as appropriate.	
•	•	• • • •	
2. The	estimates that the ec	onomic impact of this regulation (which includes	the fiscal impact) is:
(Agency/Department)	•		
Below \$10 million			
Between \$10 and \$25 million			
Between \$25 and \$50 million			
Over \$50 million <i>IIf the economic impact</i> .	is over SSO million. agencies are r	equired to submit a <u>Standardized Regulatory Impac</u>	t Assessment
	ent Code Section 11346.3(c)]		
3. Enter the total number of businesses impacted			•
Describe the types of businesses (include none	orofits):		
Enter the number or percentage of total			•
businesses impacted that are small businesses			
	,	•	•
4. Enter the number of businesses that will be cre	eated:	eliminated:	•
Explain:			
5. Indicate the geographic extent of Impacts:	Statewide		
Г	Local or regional (List areas):	The state of the s	
			• .
6. Enter the number of jobs created:	and eliminated:		
Describe the types of jobs or occupations imp	acted:		
7. Will the regulation affect the ability of California			
other states by making it more costly to produ	ce goods or services here?	YES NO	,
If YES, explain briefly:			
and dufning an entity			
			,

# **ECONOMIC AND FISCAL IMPACT STATEMENT**

(REGULATIONS AND ORDERS) STD. 399 (REV. 12/2013)

## ECONOMIC IMPACT STATEMENT (CONTINUED)

B. ESTIMATED COSTS Include calculations and assumptions in the rulemaking record.				
1. What are the total statewide dollar costs that businesses and Individuals may incur to comply with this regulation over its lifetime? \$				
	a. Initial costs for a small business: \$	Annual ongoing costs: \$	Years:	
		Annual ongoing costs; \$		
		Annual ongoing costs: \$		
	d. Describe other economic costs that may occur.			
2.	If multiple industries are impacted, enter the share of total costs for	each industry:		
3.	If the regulation imposes reporting requirements, enter the annual c Include the dollar costs to do programming, record keeping, reporting, a			
4.	Will this regulation directly impact housing costs? YES	NO		
	if YES, enter the	annual dollar cost per housing unit: \$		
		Number of units:	•	
5.	Are there comparable Federal regulations?	NO		
	Explain the need for State regulation given the existence or, absence	of Federal regulations:		
	Enter any additional costs to businesses and/or individuals that may	pe due to State - Federal differences: \$		
c.	ESTIMATED BENEFITS Estimation of the dollar value of benefits is	not specifically required by rulemaking law, but en	couraged.	
1.	Briefly summarize the benefits of the regulation, which may include health and welfare of California residents, worker safety and the Stat			
2.	Are the benefits the result of: specific statutory requirements, or	goals developed by the agency based on broa	ad statutory authority?	
	Explain:		· · · · · · · · · · · · · · · · · · ·	
3.	What are the total statewide benefits from this regulation over its life	etime? \$		
4.	Briefly describe any expansion of businesses currently doing busines	s within the State of California that would result from	n this regulation:	
		•		
D.	ALTERNATIVES TO THE REGULATION Include calculations and specifically required by rulemaking law, but encouraged.	assumptions in the rulemaking record. Estimation c		
1.	List alternatives considered and describe them below, if no alternative			
	•			

## ECONOMIC AND FISCAL IMPACT STATEMENT

(REGULATIONS AND ORDERS) STD. 399 (REV. 12/2013)

## ECONOMIC IMPACT STATEMENT (CONTINUED)

2.	Summarize the	total statewide costs a	nd benefits from this regul	ation and each a	ternative consid	lered:		
	Regulation:	Benefit: \$	Cost; \$		<del>_</del>			
	Alternative 1:	Benefit: \$	Cost: \$		•••			
	Alternative 2:	Benefit: \$	Cost: \$		_	•		
3.			that are rélevant to a com als regulation or alternati					
4.	regulation mai	ndates the use of spec cedures. Were perform	consider performance sta fic technologies or equip ance standards considere	ment, or prescril d to lower comp	oes specific liance costs?	YES	□ NO	
<u> </u>	MAJOR REGU	LATIONS Include cal	culations and assumption	s in the rulemak	ing record.			
		•	nmental Protection Age e following (per Healt				epartments are required to erwise, skip to E4.	
1.	Will the estima	ted costs of this regulat	lon to California business	enterprises exce	ed \$10 million?	YES	□ NO	
		·	. <b>If</b>	YES, complete If NO, skip				
2.	Briefly describe	each alternative, or co	mbination of alternatives,	for which a cost-	effectiveness an	alysis was p	erformed:	
	Alternative 1:		•		· · · · · · · · · · · · · · · · · · ·			
	Alternative 2:	·						
	(Attach addition	nal pages for other alteri	natives)					
3.	For the reculat	tion, and each alternati	ve Just described, enter the	estimated total	cost and overall	rost-effecti	inits: senevi	
			•					
		-						
4,	exceeding \$50	million in any 12-mont	ew have an estimated eco	nomic impact to e the major regu	business enterp	rises and Inc	dividuals located in or doing business in Californ d with the Secretary of State through 12 months	ia
	Z3Y [	NO						
	IF YES, agencies are required to submit a <u>Standardized Requiatory Impact Assessment (SRIA)</u> as specified in Government Code Section 11346.3(c) and to include the SRIA in the Initial Statement of Reasons.							
5.	Briefly describe	the following:						
	The increase o	r decrease of investme	nt in the State:				·	munus
٠	The Incentive	for innovation in produ	cts, materials or processes	:				_
	The benefits o residents, work	f the regulations, include ker safety, and the state	ling, but not limited to, be 's environment and qualit	nefits to the hea y of life, among :	ith, safety, and w ny other benefi	velfare of Ca ts identified	lifornia I by the agency:	

# ECONOMIC AND FISCAL IMPACT STATEMENT

(REGULATIONS AND ORDERS) 8TD. 389 (REV. 12/2013)

#### FISCAL IMPACT STATEMENT

A. FISCALEFFECT ON LOCAL GOVERNMENT Indicate appropriate boxes 1 through 6 and attach calculations and assumptions of fiscal impact for the current year and two subsequent Fiscal Years.				
1. Additional expenditures in the current State Fiscal Year which are reimbursable by the State, (Approximate) (Pursuant to Section 6 of Article XIII B of the California Constitution and Sections 17500 et seq. of the Government Code).				
\$				
a. Funding provided in				
Budget Act of , Statutes of				
b. Funding will be requested in the Governor's Budget Act of				
Fiscal Year:				
2. Additional expenditures in the current State Fiscal Year which are NOT reimbursable by the State. (Approximate) (Pursuant to Section 6 of Article XIII B of the California Constitution and Sections 17500 et seq. of the Government Code).				
\$	٠			
Check reason(s) this regulation is not reimbursable and provide the appropriate information:				
a. Implements the Federal mandate contained in				
b. Implements the court mandate set forth by theCourt.				
Case of: vs.	<del></del>			
c. Implements a mandate of the people of this State expressed in their approval of Proposition No.				
Date of Election:				
d. Issued only in response to a specific request from affected local entity(s).				
o. Issued only in response to a specific request from affected local entity(s).				
Local entity(s) affected:				
e. Will be fully financed from the fees, revenue, etc. from:	_			
Authorized by Section: of the Code;				
f. Provides for savings to each affected unit of local government which will, at a minimum, offset any additional costs to each;				
g. Creates, eliminates, or changes the penalty for a new crime or infraction contained in				
3. Annual Savings. (approximate)				
s				
4. No additional costs or savings. This regulation makes only technical, non-substantive or clarifying changes to current law regulations.				
5. No fiscal impact exists. This regulation does not affect any local entity or program.				
6. Other, Explain				

#### ECONOMIC AND FISCAL IMPACT STATEMENT

(REGULATIONS AND ORDERS)

STD 399 (REV. 12/2013)

## FISCAL IMPACT STATEMENT (CONTINUED)

B. FISCAL EFFECT ON STATE GOVERNMENT Indicate appropriate boxes 1 through 4 and attac year and two subsequent Fiscal Years.	h calculations and assumptions of fiscal impact for the current
1. Additional expenditures in the current State Fiscal Year. (Approximate)	
\$	
It is anticipated that State agencies will:	
<ul> <li>a. Absorb these additional costs within their existing budgets and resources.</li> </ul>	× 8
b. Increase the currently authorized budget level for the Fisca	Year
2. Savings in the current State Fiscal Year. (Approximate)	
\$	9
3. No fiscal impact exists. This regulation does not affect any State agency or program.	,
4. Other. Explain	
C. FISCAL EFFECT ON FEDERAL FUNDING OF STATE PROGRAMS Indicate appropriate boxes impact for the current year and two subsequent Fiscal Years.	1 through 4 and attach calculations and assumptions of fiscal
1. Additional expenditures in the current State Fiscal Year. (Approximate)	
	8
\$	
2. Savings in the current State Fiscal Year. (Approximate)	
\$	
3. No fiscal impact exists. This regulation does not affect any federally funded State agency or pro-	gram.
4. Other. Explain	
FISCAL OFFICER SIGNATURE	DATE /
	ali led
a A gar	10/11/18
The signature attests that the agency has completed the STD. 399 according to the instru he impacts of the proposed rulemaking. State boards, offices, or departments not under highest ranking official in the organization.	an Agency Secretary must have the form signed by the
AGENCY SECRETARY	DATE
a de Much	10-11-18
Finance approval and signature is required when SAM sections 6601-6616 require comp	oletion of Fiscal Impact Statement in the STD. 399.
DEPARTMENT OF FINANCE PROGRAM BUDGET MANAGER	DATE .
	*